## PHA 5-Year and Annual Plan

### U.S. Department of Housing and Urban Development Office of Public and Indian Housing

OMB No. 2577-0226 Expires 4/30/2011

1.0	PHA Information PHA Name:HOUSINGAUTHORITY CITY OF VINCENNES PHA Code: IN002 PHA Type: Small						
2.0		Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: 343  Number of HCV units: 372					
3.0	3.0 Submission Type  ☐ 5-Year and Annual Plan X Annual Plan Only	Submission Type  5-Year and Annual Plan  X Annual Plan Only  5-Year Plan Only					
4.0	4.0 PHA Consortia PHA Consortia: (Check	PHA Consortia PHA Consortia: (Check box if submitting a joint Plan and complete table below.)					
	Participating PHAs Progra Code Consor	m(s) Included in the	Programs Not in the Consortia	No. of Unit Program	ts in Each		
	PHA 1:		Consortiu	PH	HCV		
	PHA 2:						
5.0	PHA 3:						
5.0	<b>5.0 5-Year Plan.</b> Complete items 5.1 and 5.2 only at 5-Year Plan upda	te.					
5.1	5.1 Mission. State the PHA's Mission for serving the needs of low-inc jurisdiction for the next five years:  TO ENSURE, SAFE AND DECENT, AFFORDABLE HOUSING INDEPENDENCE.						
5.2		Goals and Objectives. Identify the PHA's quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan.					
6.0	(a) Identify all PHA Plan elements that have been revised by the P						
7.0		Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. Include statements related to these programs as applicable.					
8.0	<b>8.0</b> Capital Improvements. Please complete Parts 8.1 through 8.3, as	applicable.					
8.1	<ul> <li>complete and submit the Capital Fund Program Annual Statement/ open CFP grant and CFFP financing.</li> <li>IN36P00250111</li> </ul>	IN36P00250111					
8.2	8.2 Capital Fund Program Five-Year Action Plan. As part of the su Program Five-Year Action Plan, form HUD-50075.2, and subseque	IN36P00250112  Capital Fund Program Five-Year Action Plan. As part of the submission of the Annual Plan, PHAs must complete and submit the Capital Fund Program Five-Year Action Plan, form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan.					
8.3	8.3 Capital Fund Financing Program (CFFP).  Check if the PHA proposes to use any portion of its Capital Funding finance capital improvements.	nd Program (CFP)/Rep	lacement Housing Factor (RH	F) to repay deb	ot incurred to		
9.0	Housing Needs. Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location.						

- Strategy for Addressing Housing Needs. Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.
   Additional Information. Describe the following, as well as any additional information HUD has requested.
   (a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year Plan.
   (b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial"
- 11.0 Required Submission for HUD Field Office Review. In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. Note: Faxed copies of these documents will not be accepted by the Field Office.
  - (a) Form HUD-50077, PHA Certifications of Compliance with the PHA Plans and Related Regulations (which includes all certifications relating to Civil Rights)
  - (b) Form HUD-50070, Certification for a Drug-Free Workplace (PHAs receiving CFP grants only)
  - (c) Form HUD-50071, Certification of Payments to Influence Federal Transactions (PHAs receiving CFP grants only)
  - (d) Form SF-LLL, Disclosure of Lobbying Activities (PHAs receiving CFP grants only)
  - (e) Form SF-LLL-A, Disclosure of Lobbying Activities Continuation Sheet (PHAs receiving CFP grants only)
  - (f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations.
  - (g) Challenged Elements

deviation/modification"

- (h) Form HUD-50075.1, Capital Fund Program Annual Statement/Performance and Evaluation Report (PHAs receiving CFP grants only)
- (i) Form HUD-50075.2, Capital Fund Program Five-Year Action Plan (PHAs receiving CFP grants only)

This information collection is authorized by Section 511 of the Quality Housing and Work Responsibility Act, which added a new section 5A to the U.S. Housing Act of 1937, as amended, which introduced 5-Year and Annual PHA Plans. The 5-Year and Annual PHA plans provide a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, and informs HUD, families served by the PHA, and members of the public of the PHA's mission and strategies for serving the needs of low-income and very low-income families. This form is to be used by all PHA types for submission of the 5-Year and Annual Plans to HUD. Public reporting burden for this information collection is estimated to average 12.68 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. HUD may not collect this information, and respondents are not required to complete this form, unless it displays a currently valid OMB Control Number.

**Privacy Act Notice.** The United States Department of Housing and Urban Development is authorized to solicit the information requested in this form by virtue of Title 12, U.S. Code, Section 1701 et seq., and regulations promulgated thereunder at Title 12, Code of Federal Regulations. Responses to the collection of information are required to obtain a benefit or to retain a benefit. The information requested does not lend itself to confidentiality

### **Instructions form HUD-50075**

**Applicability**. This form is to be used by all Public Housing Agencies (PHAs) with Fiscal Year beginning April 1, 2008 for the submission of their 5-Year and Annual Plan in accordance with 24 CFR Part 903. The previous version may be used only through April 30, 2008.

#### 1.0 PHA Information

Include the full PHA name, PHA code, PHA type, and PHA Fiscal Year Beginning (MM/YYYY).

#### 2.0 Inventory

Under each program, enter the number of Annual Contributions Contract (ACC) Public Housing (PH) and Section 8 units (HCV).

#### 3.0 Submission Type

Indicate whether this submission is for an Annual and Five Year Plan, Annual Plan only, or 5-Year Plan only.

#### 4.0 PHA Consortia

Check box if submitting a Joint PHA Plan and complete the table.

#### 5.0 Five-Year Plan

Identify the PHA's Mission, Goals and/or Objectives (24 CFR 903.6). Complete only at 5-Year update.

- 5.1 Mission. A statement of the mission of the public housing agency for serving the needs of low-income, very low-income, and extremely low-income families in the jurisdiction of the PHA during the years covered under the plan.
- **5.2** Goals and Objectives. Identify quantifiable goals and objectives that will enable the PHA to serve the needs of low income, very low-income, and extremely low-income families.
- 6.0 PHA Plan Update. In addition to the items captured in the Plan template, PHAs must have the elements listed below readily available to the public. Additionally, a PHA must:
  - (a) Identify specifically which plan elements have been revised since the PHA's prior plan submission.
  - (b) Identify where the 5-Year and Annual Plan may be obtained by the public. At a minimum, PHAs must post PHA Plans, including updates, at each Asset Management Project (AMP) and main office or central office of the PHA. PHAs are strongly encouraged to post complete PHA Plans on its official website. PHAs are also encouraged to provide each resident council a copy of its 5-Year and Annual Plan.

#### PHA Plan Elements. (24 CFR 903.7)

 Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures. Describe the PHA's policies that govern resident or tenant eligibility, selection and admission including admission preferences for both public housing and HCV and unit assignment policies for public housing; and procedures for maintaining waiting lists for admission to public housing and address any site-based waiting lists.

- 2. Financial Resources. A statement of financial resources, including a listing by general categories, of the PHA's anticipated resources, such as PHA Operating, Capital and other anticipated Federal resources available to the PHA, as well as tenant rents and other income available to support public housing or tenant-based assistance. The statement also should include the non-Federal sources of funds supporting each Federal program, and state the planned use for the resources.
- Rent Determination. A statement of the policies of the PHA governing rents charged for public housing and HCV dwelling units.
- 4. Operation and Management. A statement of the rules, standards, and policies of the PHA governing maintenance management of housing owned, assisted, or operated by the public housing agency (which shall include measures necessary for the prevention or eradication of pest infestation, including cockroaches), and management of the PHA and programs of the PHA.
- Grievance Procedures. A description of the grievance and informal hearing and review procedures that the PHA makes available to its residents and applicants.
- 6. Designated Housing for Elderly and Disabled Families. With respect to public housing projects owned, assisted, or operated by the PHA, describe any projects (or portions thereof), in the upcoming fiscal year, that the PHA has designated or will apply for designation for occupancy by elderly and disabled families. The description shall include the following information: 1) development name and number; 2) designation type; 3) application status; 4) date the designation was approved, submitted, or planned for submission, and; 5) the number of units affected.
- 7. Community Service and Self-Sufficiency. A description of: (1) Any programs relating to services and amenities provided or offered to assisted families; (2) Any policies or programs of the PHA for the enhancement of the economic and social self-sufficiency of assisted families, including programs under Section 3 and FSS; (3) How the PHA will comply with the requirements of community service and treatment of income changes resulting from welfare program requirements. (Note: applies to only public housing).
- 8. Safety and Crime Prevention. For public housing only, describe the PHA's plan for safety and crime prevention to ensure the safety of the public housing residents. The statement must include: (i) A description of the need for measures to ensure the safety of public housing residents; (ii) A description of any crime prevention activities conducted or to be conducted by the PHA; and (iii) A description of the coordination between the PHA and the appropriate police precincts for carrying out crime prevention measures and activities.

- Pets. A statement describing the PHAs policies and requirements pertaining to the ownership of pets in public housing.
- 10. Civil Rights Certification. A PHA will be considered in compliance with the Civil Rights and AFFH Certification if: it can document that it examines its programs and proposed programs to identify any impediments to fair housing choice within those programs; addresses those impediments in a reasonable fashion in view of the resources available; works with the local jurisdiction to implement any of the jurisdiction's initiatives to affirmatively further fair housing; and assures that the annual plan is consistent with any applicable Consolidated Plan for its jurisdiction.
- Fiscal Year Audit. The results of the most recent fiscal year audit for the PHA.
- 12. Asset Management. A statement of how the agency will carry out its asset management functions with respect to the public housing inventory of the agency, including how the agency will plan for the long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs for such inventory.
- 13. Violence Against Women Act (VAWA). A description of: 1) Any activities, services, or programs provided or offered by an agency, either directly or in partnership with other service providers, to child or adult victims of domestic violence, dating violence, sexual assault, or stalking; 2) Any activities, services, or programs provided or offered by a PHA that helps child and adult victims of domestic violence, dating violence, sexual assault, or stalking, to obtain or maintain housing; and 3) Any activities, services, or programs provided or offered by a public housing agency to prevent domestic violence, dating violence, sexual assault, and stalking, or to enhance victim safety in assisted families.
- 7.0 Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers
  - (a) Hope VI or Mixed Finance Modernization or Development.

    1) A description of any housing (including project number (if known) and unit count) for which the PHA will apply for HOPE VI or Mixed Finance Modernization or Development; and 2) A timetable for the submission of applications or proposals. The application and approval process for Hope VI, Mixed Finance Modernization or Development, is a separate process. See guidance on HUD's website at: <a href="http://www.hud.gov/offices/pih/programs/ph/hope6/index.cfm">http://www.hud.gov/offices/pih/programs/ph/hope6/index.cfm</a>
  - (b) Demolition and/or Disposition. With respect to public housing projects owned by the PHA and subject to ACCs under the Act: (1) A description of any housing (including project number and unit numbers [or addresses]), and the number of affected units along with their sizes and accessibility features) for which the PHA will apply or is currently pending for demolition or disposition; and (2) A timetable for the demolition or disposition. The application and approval process for demolition and/or disposition is a separate process. See guidance on HUD's website at:

http://www.hud.gov/offices/pih/centers/sac/demo\_dispo/index.cfm

Note: This statement must be submitted to the extent that approved and/or pending demolition and/or disposition has changed.

(c) Conversion of Public Housing. With respect to public housing owned by a PHA: 1) A description of any building or buildings (including project number and unit count) that the PHA is required to convert to tenant-based assistance or that the public housing agency plans to voluntarily convert; 2) An analysis of the projects or buildings required to be converted; and 3) A statement of the amount of assistance received under this chapter to be used for rental assistance or other housing assistance in connection with such conversion. See guidance on HUD's website at: <a href="http://www.hud.gov/offices/pih/centers/sac/conversion.cfm">http://www.hud.gov/offices/pih/centers/sac/conversion.cfm</a>

- (d) Homeownership. A description of any homeownership (including project number and unit count) administered by the agency or for which the PHA has applied or will apply for approval.
- (e) Project-based Vouchers. If the PHA wishes to use the project-based voucher program, a statement of the projected number of project-based units and general locations and how project basing would be consistent with its PHA Plan.
- 8.0 Capital Improvements. This section provides information on a PHA's Capital Fund Program. With respect to public housing projects owned, assisted, or operated by the public housing agency, a plan describing the capital improvements necessary to ensure long-term physical and social viability of the projects must be completed along with the required forms. Items identified in 8.1 through 8.3, must be signed where directed and transmitted electronically along with the PHA's Annual Plan submission.
  - 8.1 Capital Fund Program Annual Statement/Performance and Evaluation Report. PHAs must complete the Capital Fund Program Annual Statement/Performance and Evaluation Report (form HUD-50075.1), for each Capital Fund Program (CFP) to be undertaken with the current year's CFP funds or with CFFP proceeds. Additionally, the form shall be used for the following purposes:
    - (a) To submit the initial budget for a new grant or CFFP;
    - (b) To report on the Performance and Evaluation Report progress on any open grants previously funded or CFFP; and
    - (c) To record a budget revision on a previously approved open grant or CFFP, e.g., additions or deletions of work items, modification of budgeted amounts that have been undertaken since the submission of the last Annual Plan. The Capital Fund Program Annual Statement/Performance and Evaluation Report must be submitted annually.

Additionally, PHAs shall complete the Performance and Evaluation Report section (see footnote 2) of the *Capital Fund Program Annual Statement/Performance and Evaluation* (form HUD-50075.1), at the following times:

- At the end of the program year; until the program is completed or all funds are expended;
- When revisions to the Annual Statement are made, which do not require prior HUD approval, (e.g., expenditures for emergency work, revisions resulting from the PHAs application of fungibility); and
- Upon completion or termination of the activities funded in a specific capital fund program year.

#### 8.2 Capital Fund Program Five-Year Action Plan

PHAs must submit the *Capital Fund Program Five-Year Action Plan* (form HUD-50075.2) for the entire PHA portfolio for the first year of participation in the CFP and annual update thereafter to eliminate the previous year and to add a new fifth year (rolling basis) so that the form always covers the present five-year period beginning with the current year.

8.3 Capital Fund Financing Program (CFFP). Separate, written HUD approval is required if the PHA proposes to pledge any portion of its CFP/RHF funds to repay debt incurred to finance capital improvements. The PHA must identify in its Annual and 5-year capital plans the amount of the annual payments required to service the debt. The PHA must also submit an annual statement detailing the use of the CFFP proceeds. See guidance on HUD's website at:

http://www.hud.gov/offices/pih/programs/ph/capfund/cffp.cfm

- 9.0 Housing Needs. Provide a statement of the housing needs of families residing in the jurisdiction served by the PHA and the means by which the PHA intends, to the maximum extent practicable, to address those needs. (Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).
  - 9.1 Strategy for Addressing Housing Needs. Provide a description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. (Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).
- **10.0** Additional Information. Describe the following, as well as any additional information requested by HUD:
  - (a) Progress in Meeting Mission and Goals. PHAs must include (i) a statement of the PHAs progress in meeting the mission and goals described in the 5-Year Plan; (ii) the basic criteria the PHA will use for determining a significant amendment from its 5-year Plan; and a significant amendment or modification to its 5-Year Plan and Annual Plan. (Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).
  - (b) Significant Amendment and Substantial Deviation/Modification. PHA must provide the definition of "significant amendment" and "substantial deviation/modification". (Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan.)

- (c) PHAs must include or reference any applicable memorandum of agreement with HUD or any plan to improve performance. (Note: Standard and Troubled PHAs complete annually).
- 11.0 Required Submission for HUD Field Office Review. In order to be a complete package, PHAs must submit items (a) through (g), with signature by mail or electronically with scanned signatures. Items (h) and (i) shall be submitted electronically as an attachment to the PHA Plan.
  - (a) Form HUD-50077, PHA Certifications of Compliance with the PHA Plans and Related Regulations
  - (b) Form HUD-50070, Certification for a Drug-Free Workplace (PHAs receiving CFP grants only)
  - (c) Form HUD-50071, Certification of Payments to Influence Federal Transactions (PHAs receiving CFP grants only)
  - (d) Form SF-LLL, Disclosure of Lobbying Activities (PHAs receiving CFP grants only)
  - (e) Form SF-LLL-A, Disclosure of Lobbying Activities Continuation Sheet (PHAs receiving CFP grants only)
  - (f) Resident Advisory Board (RAB) comments.
  - (g) Challenged Elements. Include any element(s) of the PHA Plan that is challenged.
  - (h) Form HUD-50075.1, Capital Fund Program Annual Statement/Performance and Evaluation Report (Must be attached electronically for PHAs receiving CFP grants only). See instructions in 8.1.
  - (i) Form HUD-50075.2, Capital Fund Program Five-Year Action Plan (Must be attached electronically for PHAs receiving CFP grants only). See instructions in 8.2.



### Vincennes Housing Authority 501 Hart Street P.O. Box 1636

Vincennes, Indiana 47591 (812) 882-5494

Fax (812) 882-7663 TDD (812) 882-5494

**Commissioners:** 

Sharon S. Walker M. Frances Huxley Jack Hill Tim Thompson Patricia Madden Janice Eads Rebecca Nowaskie

April 17, 2012

Nellene Lyles

U.S. Department of Housing and Urban Development

Dear Nellene,

The Vincennes Housing Authority has submitted our Annual PHA Plan

Please find attached the following required attachments to complete our FHEO Review.

- Certification of Payments to Influence Federal Transactions 1. HUD form 50071
- 2. Certification for a Drug-Free Workplace HUD form 50070
- Disclosure of Lobbying Activities 3.
- 4. PHA Certifications of Compliance with the PHA Plans and Related Regulations, Board Resolution PH-3-2012
- 5. Certification from the Indiana Housing Finance Authority stating we are in Compliance with the State of Indiana Consolidated Plan
- 6. Civil Rights Certification HUD Form 50077-cr
- Significant Amendment and Substantial Deviation 7. Certification.
- Resident Council Advisory Board Statement If you need any further assistance, please advise. Thank you for your help.

Sincerely, Linda L. Fredrick

Linda Fredrick **Executive Director** 





# Certification of Payments to Influence Federal Transactions

Previous edition is obsolete

U.S. Department of Housing and Urban Development Office of Public and Indian Housing

Applicant Name		
HOUSING AUTHORITY CITY OF VINCENNES		
Program/Activity Receiving Federal Grant Funding PHA PLAN		
The undersigned certifies, to the best of his or her knowledge and	d belief, th	hat:
(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection.	certific at all under	The undersigned shall require that the language of this sation be included in the award documents for all subawards tiers (including subcontracts, subgrants, and contracts grants, loans, and cooperative agreements) and that all ipients shall certify and disclose accordingly.
tion with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.	relianc into. S or ente	ertification is a material representation of fact upon which e was placed when this transaction was made or entered ubmission of this certification is a prerequisite for making ring into this transaction imposed by Section 1352, Title S. Code. Any person who fails to file the required
(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, Disclosure Form to Report Lobbying, in accordance with its instructions.	certific	eation shall be subject to a civil penalty of not less than 0 and not more than \$100,000 for each such failure.
I hereby certify that all the information stated herein, as well as any inf Warning: HUD will prosecute false claims and statements. Conviction ma (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)		
Name of Authorized Official	Title	
LINDA FREDRICK	EXECU	TIVE DIRECTOR
Linda S. Fredrick		Date (mm/dd/yyyy) 04/02/2012

### DISCLOSURE OF LOBBYING ACTIVITIES

Approved by OMB 0348-0046

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352

(See reverse for public burden disclosure.)

1. Type of Federal Action:	2. Status of Federa	l Action:	3. Report Type:	
B a. contract	B a. bid/of	ffer/application	A a. initial fil	
b. grant	b. initial	award	b. materia	
c. cooperative agreement	c. post-	award	For Material	Change Only:
d. loan			year	quarter
e. loan guarantee			date of las	st report
f. loan insurance				
4. Name and Address of Reporting	g Entity:	5. If Reporting Er	ntity in No. 4 is a S	ubawardee, Enter Name
Prime Subawardee		and Address of	Prime:	
Tier	, if known:			
		HOUSING AUTH	HORITY CITY OF V	INCENNES
		501 HART STRE	ET	
		VINCENNES IN	47591	
Congressional District, if know	n: 4c	Congressional	District, if known:	
6. Federal Department/Agency:			m Name/Descripti	on:
U S DEPARTMENT OF HOUSING	C LIDDAN DEVELO			
U S DEPARTMENT OF HOUSING	J UKBAN DEVELO			
		CFDA Number,	if applicable:	
8. Federal Action Number, if know	/n:	9. Award Amount	t, if known:	
		\$		
10. a. Name and Address of Lobb	ving Registrant	h Individuals Per	rforming Services	(including address if
(if individual, last name, first		different from N		(Including address if
(II IIIdividual, last lialile, liist	name, wii).	(last name, firs		
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11. Information requested through this form is authoriz 1352. This disclosure of lobbying activities is a m	naterial representation of fact	Signature:	ea of. The	arick
upon which reliance was placed by the tier above whor entered into. This disclosure is required pursu		Print Name: LINI	DA FŘÉDRICK	
information will be available for public inspection.	Any person who fails to file the	Title: EXECUTIVE		
required disclosure shall be subject to a civil penalty not more than \$100,000 for each such failure.	of not less than \$10,000 and			Data: 04/02/2012
		Telephone No.: 8	128823494	Date:
Fadaval Haa Onlin				Authorized for Local Reproduction
Federal Use Only:				Standard Form LLL (Rev. 7-97)

# Certification for a Drug-Free Workplace

## U.S. Department of Housing and Urban Development

Applicant Name HOUSING AUTHORITY CITY OF VINCENNES Program/Activity Receiving Federal Grant Funding PHA PLAN IN002 Acting on behalf of the above named Applicant as its Authorized Official, I make the following certifications and agreements to the Department of Housing and Urban Development (HUD) regarding the sites listed below: I certify that the above named Applicant will or will continue (1) Abide by the terms of the statement; and to provide a drug-free workplace by: (2) Notify the employer in writing of his or her convica. Publishing a statement notifying employees that the untion for a violation of a criminal drug statute occurring in the lawful manufacture, distribution, dispensing, possession, or use workplace no later than five calendar days after such conviction; of a controlled substance is prohibited in the Applicant's worke. Notifying the agency in writing, within ten calendar days place and specifying the actions that will be taken against after receiving notice under subparagraph d.(2) from an ememployees for violation of such prohibition. ployee or otherwise receiving actual notice of such conviction. b. Establishing an on-going drug-free awareness program to Employers of convicted employees must provide notice, includinform employees --ing position title, to every grant officer or other designee on whose grant activity the convicted employee was working, (1) The dangers of drug abuse in the workplace; unless the Federalagency has designated a central point for the (2) The Applicant's policy of maintaining a drug-free receipt of such notices. Notice shall include the identification workplace; number(s) of each affected grant; (3) Any available drug counseling, rehabilitation, and f. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph d.(2), with respect employee assistance programs; and to any employee who is so convicted ---(4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace. (1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the c. Making it a requirement that each employee to be engaged requirements of the Rehabilitation Act of 1973, as amended; or in the performance of the grant be given a copy of the statement required by paragraph a.; (2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program apd. Notifying the employee in the statement required by paraproved for such purposes by a Federal, State, or local health, law graph a, that, as a condition of employment under the grant, the enforcement, or other appropriate agency; employee will --g. Making a good faith effort to continue to maintain a drugfree workplace through implementation of paragraphs a. thru f. 2. Sites for Work Performance. The Applicant shall list (on separate pages) the site(s) for the performance of work done in connection with the HUD funding of the program/activity shown above: Place of Performance shall include the street address, city, county, State, and zip code. Identify each sheet with the Applicant name and address and the program/activity receiving grant funding.) IN002001 IN002002 IN002003 IN002004 Check here if there are workplaces on file that are not identified on the attached sheets. I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802) Name of Authorized Official Title LINDA FREDRICK **EXECUTIVE DIRECTOR** nda 8. Fredrick 04/02/2012

### PHA Certifications of Compliance with PHA Plans and Related Regulations

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/2011

BOARD RESOLUTION PH-3-2012

### PHA Certifications of Compliance with the PHA Plans and Related Regulations: Board Resolution to Accompany the PHA 5-Year and Annual PHA Plan

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioners, I approve the submission of the \_\_\_\_ 5-Year and/or \_X Annual PHA Plan for the PHA fiscal year beginning \_2012, hereinafter referred to as" the Plan", of which this document is a part and make the following certifications and agreements with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:

1. The Plan is consistent with the applicable comprehensive housing affordability strategy (or any plan incorporating such strategy) for the jurisdiction in which the PHA is located.

2. The Plan contains a certification by the appropriate State or local officials that the Plan is consistent with the applicable Consolidated Plan, which includes a certification that requires the preparation of an Analysis of Impediments to Fair Housing Choice, for the PHA's jurisdiction and a description of the manner in which the PHA Plan is consistent with the applicable Consolidated Plan.

3. The PHA certifies that there has been no change, significant or otherwise, to the Capital Fund Program (and Capital Fund Program/Replacement Housing Factor) Annual Statement(s), since submission of its last approved Annual Plan. The Capital Fund Program Annual Statement/Annual Statement/Performance and Evaluation Report must be submitted annually even if there is no change.

4. The PHA has established a Resident Advisory Board or Boards, the membership of which represents the residents assisted by the PHA, consulted with this Board or Boards in developing the Plan, and considered the recommendations of the Board or Boards (24 CFR 903.13). The PHA has included in the Plan submission a copy of the recommendations made by the Resident Advisory Board or Boards and a description of the manner in which the Plan addresses these recommendations.

5. The PHA made the proposed Plan and all information relevant to the public hearing available for public inspection at least 45 days before the hearing, published a notice that a hearing would be held and conducted a hearing to discuss the Plan and invited public comment.

6. The PHA certifies that it will carry out the Plan in conformity with Title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990.

7. The PHA will affirmatively further fair housing by examining their programs or proposed programs, identify any impediments to fair housing choice within those programs, address those impediments in a reasonable fashion in view of the resources available and work with local jurisdictions to implement any of the jurisdiction's initiatives to affirmatively further fair housing that require the PHA's involvement and maintain records reflecting these analyses and actions.

8. For PHA Plan that includes a policy for site based waiting lists:

• The PHA regularly submits required data to HUD's 50058 PIC/IMS Module in an accurate, complete and timely manner (as specified in PIH Notice 2006-24);

• The system of site-based waiting lists provides for full disclosure to each applicant in the selection of the development in which to reside, including basic information about available sites; and an estimate of the period of time the applicant would likely have to wait to be admitted to units of different sizes and types at each site;

Adoption of site-based waiting list would not violate any court order or settlement agreement or be inconsistent with a
pending complaint brought by HUD;

• The PHA shall take reasonable measures to assure that such waiting list is consistent with affirmatively furthering fair housing;

• The PHA provides for review of its site-based waiting list policy to determine if it is consistent with civil rights laws and certifications, as specified in 24 CFR part 903.7(c)(1).

9. The PHA will comply with the prohibitions against discrimination on the basis of age pursuant to the Age Discrimination Act of 1975.

10. The PHA will comply with the Architectural Barriers Act of 1968 and 24 CFR Part 41, Policies and Procedures for the Enforcement of Standards and Requirements for Accessibility by the Physically Handicapped.

11. The PHA will comply with the requirements of section 3 of the Housing and Urban Development Act of 1968, Employment Opportunities for Low-or Very-Low Income Persons, and with its implementing regulation at 24 CFR Part 135.

- 12. The PHA will comply with acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 and implementing regulations at 49 CFR Part 24 as applicable.
- 13. The PHA will take appropriate affirmative action to award contracts to minority and women's business enterprises under 24 CFR 5.105(a).
- 14. The PHA will provide the responsible entity or HUD any documentation that the responsible entity or HUD needs to carry out its review under the National Environmental Policy Act and other related authorities in accordance with 24 CFR Part 58 or Part 50, respectively.
- 15. With respect to public housing the PHA will comply with Davis-Bacon or HUD determined wage rate requirements under Section 12 of the United States Housing Act of 1937 and the Contract Work Hours and Safety Standards Act.
- 16. The PHA will keep records in accordance with 24 CFR 85.20 and facilitate an effective audit to determine compliance with program requirements.
- 17. The PHA will comply with the Lead-Based Paint Poisoning Prevention Act, the Residential Lead-Based Paint Hazard Reduction Act of 1992, and 24 CFR Part 35.
- 18. The PHA will comply with the policies, guidelines, and requirements of OMB Circular No. A-87 (Cost Principles for State, Local and Indian Tribal Governments), 2 CFR Part 225, and 24 CFR Part 85 (Administrative Requirements for Grants and Cooperative Agreements to State, Local and Federally Recognized Indian Tribal Governments).
- 19. The PHA will undertake only activities and programs covered by the Plan in a manner consistent with its Plan and will utilize covered grant funds only for activities that are approvable under the regulations and included in its Plan.
- 20. All attachments to the Plan have been and will continue to be available at all times and all locations that the PHA Plan is available for public inspection. All required supporting documents have been made available for public inspection along with the Plan and additional requirements at the primary business office of the PHA and at all other times and locations identified by the PHA in its PHA Plan and will continue to be made available at least at the primary business office of the PHA.
- 21. The PHA provides assurance as part of this certification that:
  - (i) The Resident Advisory Board had an opportunity to review and comment on the changes to the policies and programs before implementation by the PHA;
  - (ii) The changes were duly approved by the PHA Board of Directors (or similar governing body); and
  - (iii) The revised policies and programs are available for review and inspection, at the principal office of the PHA during normal business hours.
- 22. The PHA certifies that it is in compliance with all applicable Federal statutory and regulatory requirements.

HOUSING AUTHORITY CITY OF VINCENNES	IN002
PHA Name	PHA Number/HA Code
5-Year PHA Plan for Fiscal Years 20 20 X Annual PHA Plan for Fiscal Years 20_12 20_1	
I hereby certify that all the information stated herein, as well as any information provi prosecute false claims and statements. Conviction may result in criminal and/or civil provided in the conviction of the	ded in the accompaniment herewith, is true and accurate. <b>Warning:</b> HUD will penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)
Name of Authorized Official	Title
JACK HILL	CHAIRMAN
Signature Sach Holl	Date 4/16/2012

# Certification by State or Local Official of PHA Plans Consistency with the Consolidated Plan

I,	Mark Young	the	Chief Operating Officer	certify
that the	Five Year and Annual Pl	HA Plan of the _	City of Vincennes	is
consister	nt with the Consolidated	Plan of	State of Indiana	prepared
pursuant	to 24 CFR Part 91.			

Signed / Dated by Appropriate State or Local Official

### **Civil Rights Certification**

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/2011

IN002

PHA Number/HA Code

### **Civil Rights Certification**

PHA Name

### **Annual Certification and Board Resolution**

HOUSING AUTHORITY CITY OF VINCENNES

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioner, I approve the submission of the Plan for the PHA of which this document is a part and make the following certification and agreement with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:

The PHA certifies that it will carry out the public housing program of the agency in conformity with title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990, and will affirmatively further fair housing.

I hereby certify that all the information state		wided in the accompaniment herewith is	true and accurate Warning: HIID will
prosecute false claims and statements. Con-	viction may result in criminal and/or civil	penalties. (18 U.S.C. 1001, 1010, 1012;	31 U.S.C. 3729, 3802)
Name of Authorized Official	LINDA FREDRICK	Title	EXECUTIVE DIRECTOR
Signature Signature	Fredrick	Date 04/02/2012	



## Vincennes Housing Authority

501 Hart Street P.O. Box 1636 Vincennes, Indiana 47591 (812) 882-5494 Fax (812) 882-7663 TDD (812) 882-5494

#### **Commissioners:**

Sharon S. Walker M. Frances Huxley Jack Hill Tim Thompson Patricia Madden Janice Eads Rebecca Nowaskie

### SIGNIFICANT AMENDMENT AND SUBSTANTIAL DEVIATION CRITERIA

Linda L. Fredrick AS DESCRIBED IN 24 CFR 903.21, A PHA MAY AMEND OR MODIFY ITS ANNUAL OR FIVE YEAR Executive Director
PLAN AFTER SUBMITTING THE PLAN TO HUD. IF THE MODIFICATION OR CHANGE IS CONSIDERED A "SIGNIFICANT AMENDMENT" OR "SUBSTANTIAL DEVIATION" THE PHA MUST THEN COMPLY WITH A NUMBER OF REQUIREMENTS SIMILAR TO THOSE REQUIRED AT INITIAL DEVELOPMENT AND SUBMISSION OF THE PHA PLAN.

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EXECUTIVE DIRECTOR, LINDA FREDRICK,





### PHA Certifications of Compliance with PHA Plans and Related Regulations

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/2011

### BOARD RESOLUTION PH-3-2012

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4. The PHA has established a Resident Advisory Board or Boards, the membership of which represents the residents assisted by the PHA, consulted with this Board or Boards in developing the Plan, and considered the recommendations of the Board or Boards (24 CFR 903.13). The PHA has included in the Plan submission a copy of the recommendations made by the Resident Advisory Board or Boards and a description of the manner in which the Plan addresses these recommendations.

5. The PHA made the proposed Plan and all information relevant to the public hearing available for public inspection at least 45 days before the hearing, published a notice that a hearing would be held and conducted a hearing to discuss the Plan and invited public comment.

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- 21. The PHA provides assurance as part of this certification that:

Previous version is obsolete

- (i) The Resident Advisory Board had an opportunity to review and comment on the changes to the policies and programs before implementation by the PHA;
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HOUSING AUTHORITY CITY OF VINCENNES	IN002
PHA Name	PHA Number/HA Code
5-Year PHA Plan for Fiscal Years 20 20_	_
X Annual PHA Plan for Fiscal Years 20 12 - 20	13
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Name of Authorized Official	Title
JACK HILL	CHAIRMAN
Signature Sach Holl	Date 4/16/2012

Page 2 of 2

form HUD-50077 (4/2008)

### Certification by State or Local Official of PHA Plans Consistency with the Consolidated Plan

I,	Mark Young	the	Chief Operating Officer	certify
that the I	Five Year and Annual P	HA Plan of the _	City of Vincennes	is
consistent with the Consolidated Plan of		State of Indiana	prepared	
pursuant	to 24 CFR Part 91.			

Signed / Dated by Appropriate State or Local Official

OMB Approval No. 2577-0226

### Civil Rights Certification

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/2011

### Civil Rights Certification

### Annual Certification and Board Resolution

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HOUSING AUTHORITY CITY OF VINCENNES	IN002	
PHA Name	PHA Number/HA Code	

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prosecute raise oranie and suscession					
Name of Authorized Official	LINDA FREDRICK	Title	EXECUTIVE DIRECTOR		
0	0 /				
Signature Linda .	Fredrick	Date 04/02/2012			
	4				



## Vincennes Housing Authority

501 Hart Street P.O. Box 1636 Vincennes, Indiana 47591 (812) 882-5494 Fax (812) 882-7663 TDD (812) 882-5494

#### **Commissioners:**

Sharon S. Walker M. Frances Huxley Jack Hill Tim Thompson Patricia Madden Janice Eads Rebecca Nowaskie

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Linda L. Fredrick
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Executive Director
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EXECUTIVE DIRECTOR, LINDA FREDRICK,







# Vincennes Housing Authority 501 Hart Street P.O. Box 1636

Vincennes, Indiana 47591 (812) 882-5494 Fax (812) 882-7663 TDD (812) 882-5494

#### Commissioners:

Sharon S. Walker M. Frances Huxley Jack Hill Tim Thompson Patricia Madden Janice Eads Rebecca Nowaskie

Thursday March 29, 2012

The Resident Advisory Board for the Housing Authority of the City of Vincennes has reviewed the application for the Housing Authority's 5 Year PHA Plan 2010-2014. We as acting members of the Resident Advisory Board fully support the items listed on the plan to be completed.

Patricia Madden

Sharon Walker

Jean Leas

Ellen Wyatt

Attest:

Linda L. Fredrick Executive Director





### RESIDENT ADVISORY BOARD MEETING

Date: 3/29/12 Location: VHA Board Room Agenda: Approve 5 Year Plan

Present: Linda Fredrick Executive Director, Rita Meredith Director Public Housing/CFP Board Members- Patricia Madden Chair Person, Sharon Walker, Jean Leas, Leona Lunsford, Ellen Wyatt

### Discussion:

The meeting was opened and roll call was taken. Ms. Fredrick explained to the board the meeting is to approve the 5 Year Plan. The 5 Year Plan was reviewed by the board. Ms. Fredrick advised the 5 Year Plan was revised to include lowering ceilings in the 1 & 2 bedrooms at Presidential Estates, Replace the ceiling fans with lighting in the 3 & 4 bedrooms at Presidential Estates, and replace HVAC at Presidential Estates and Bowman Terrace. New storage room addition at Piankeshaw Place.

The new storage unit will need the sprinkler system installed and also heat for the fire pump room to keep the pump from freezing, this is being looked into. We hope to start replacing windows at Bowman Terrace. The 2012 CF money was 89,000 less than 2011, so we have to look at spending a bit closer, really stretch our dollars VHA is a High Performer he lower amount is just do to funding .Will close the CF 2010 this week and that will leave 2011 & 2012 CF open. We have a plan for this money and work is already under way.

#### **Board Comments:**

- Leona Lunsford- Bowman Terrace would like lights in the living rooms. Linda explained this has been looked at ceilings are concrete with no electrical connections, but is being considered.
- Pat Madden- Piankeshaw handicap toilets in all units. Linda explained as request come in or empties are turned around they are being installed.
- Ellen Wyatt-Piankeshaw weather stripping around doors. Linda said she would discuss with the Maintenance Director.
- Linda advised Security locks will be in place at all sites hopefully soon. Linda explained the lock system.
- Linda advised the canopy at French Towne was damaged in the last storm, a new one will be constructed, and photos were passed.

Mrs. Madden asked if there were any further questions. With none asked Mrs. Madden asked for a motion to approve the 5 Year Plan. Mrs. Lunsford made a motion and Ms. Walker seconded the motion. The motion was signed by the Resident Board members and the meeting was adjourned. Ms. Fredrick said the next meeting would be scheduled at later date.

Signature: Sinda S. Fedrick Date: March 29, 20/2
Executive Director



# Vincennes Housing Authority 501 Hart Street P.O. Box 1636

501 Hart Street P.O. Box 1636 Vincennes, Indiana 47591 (812) 882-5494 Fax (812) 882-7663 TDD (812) 882-5494

#### **Commissioners:**

Sharon S. Walker M. Frances Huxley Jack Hill Tim Thompson Patricia Madden Janice Eads Rebecca Nowaskie

April 17, 2012

12.0275 APR 18 2012

Nellene Lyles U.S. Department of Housing and Urban Development

Dear Nellene,

Please find attached the certifications and required forms for the 2012 PHA Annual Plan for the Vincennes Housing Authority. We have enclosed an original signature set and 2 sets of copies. We were not sure who needed what so Linda had me make extras. If you need anything, please let us know.

Thank you for all your time and help, we do appreciate it.

Sincerely Carol Johnson

Director of Bookkeeping/ Computer Management







## Vincennes Housing Authority 501 Hart Street P.O. Box 1636

Vincennes, Indiana 47591 (812) 882-5494 Fax (812) 882-7663 TDD (812) 882-5494

### Commissioners:

Sharon S. Walker M. Frances Huxley Jack Hill Tim Thompson Patricia Madden Janice Eads Rebecca Nowaskie

# Linda L. Fredrick Executive Director

Thursday March 29, 2012

The Resident Advisory Board for the Housing Authority of the City of Vincennes has reviewed the application for the Housing Authority's 5 Year PHA Plan 2010-2014. We as acting members of the Resident Advisory Board fully support the items listed on the plan to be completed.

Yalricia Madden

Patricia Madden

Sharon Walker

Jean Leas

Leona Lunsford

Ellen Wyatt

Attest:

Linda L. Fredrick Executive Director







Executive Director

## Vincennes Housing Authority

501 Hart Street P.O. Box 1636 Vincennes, Indiana 47591 (812) 882-5494 Fax (812) 882-7663 TDD (812) 882-5494 **Commissioners:** 

Sharon S. Walker M. Frances Huxley Jack Hill Tim Thompson Patricia Madden Janice Eads Rebecca Nowaskie

April 17, 2012

Nellene Lyles

U.S. Department of Housing and Urban Development

Dear Nellene,

The Vincennes Housing Authority has submitted our Annual PHA Plan 2012.

Please find attached the following required attachments to complete our FHEO Review.

- 1. Certification of Payments to Influence Federal Transactions HUD form 50071
- 2. Certification for a Drug-Free Workplace HUD form 50070
- 3. Disclosure of Lobbying Activities
- 4. PHA Certifications of Compliance with the PHA Plans and Related Regulations, Board Resolution PH-3-2012
- 5. Certification from the Indiana Housing Finance Authority stating we are in Compliance with the State of Indiana Consolidated Plan
- 6. Civil Rights Certification HUD Form 50077-cr
- 7. Significant Amendment and Substantial Deviation Certification.
- 8 Resident Council Advisory Board Statement If you need any further assistance, please advise.
  Thank you for your help.

Sincerely, Linda L. Fredrick

Linda Fredrick
Executive Director





# Certification of Payments to Influence Federal Transactions

LINDA FREDRICK

Previous edition is obsolete

Fredrick

U.S. Department of Housing and Urban Development Office of Public and Indian Housing

Applicant Name	
HOUSING AUTHORITY CITY OF VINCENNES	
Program/Activity Receiving Federal Grant Funding PHA PLAN	
The undersigned certifies, to the best of his or her knowledge and	d belief, that:
(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.  (2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, Disclosure Form to Report Lobbying, in accordance with its instructions.	(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.  This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.
I hereby certify that all the information stated herein, as well as any information:  Warning: HUD will prosecute false claims and statements. Conviction me	formation provided in the accompaniment herewith, is true and accurate by result in criminal and/or civil penalties.
(18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)  Name of Authorized Official	Title

EXECUTIVE DIRECTOR

Date (mm/dd/yyyy)

form HUD 50071. (3/98) ref. Handboooks 7417.1, 7475.13, 7485.1, & 7485.3

04/02/2012

### DISCLOSURE OF LOBBYING ACTIVITIES

Approved by OMB 0348-0046

Standard Form LLL (Rev. 7-97)

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352 (See reverse for public burden disclosure.)

1. Type of Federal Action: 2. Status of Federal Action: 3. Report Type: a. contract a. bid/offer/application В a. initial filing b. grant b. initial award b. material change c. cooperative agreement c. post-award For Material Change Only: d. loan quarter e. loan guarantee date of last report f. loan insurance 4. Name and Address of Reporting Entity: 5. If Reporting Entity in No. 4 is a Subawardee, Enter Name Prime Subawardee and Address of Prime: Tier\_\_\_\_\_, if known: HOUSING AUTHORITY CITY OF VINCENNES **501 HART STREET** VINCENNES IN 47591 Congressional District, if known: 4c Congressional District, if known: 6. Federal Department/Agency: 7. Federal Program Name/Description: U S DEPARTMENT OF HOUSING URBAN DEVELO CFDA Number, if applicable: 8. Federal Action Number, if known: 9. Award Amount, if known: \$ b. Individuals Performing Services (including address if 10. a. Name and Address of Lobbying Registrant (if individual, last name, first name, MI): different from No. 10a) (last name, first name, MI): Fredrick) 11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact Signature Print Name: LINDA FREDRICK upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the Title: EXECUTIVE DIRECTOR required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure. 04/02/2012 Telephone No.: 8128825494 Date: Authorized for Local Reproduction Federal Use Only:

# Certification for a Drug-Free Workplace

## U.S. Department of Housing and Urban Development

Applicant Name HOUSING AUTHORITY CITY OF VINCENNES Program/Activity Receiving Federal Grant Funding PHA PLAN IN002 Acting on behalf of the above named Applicant as its Authorized Official, I make the following certifications and agreements to the Department of Housing and Urban Development (HUD) regarding the sites listed below: I certify that the above named Applicant will or will continue (1) Abide by the terms of the statement; and to provide a drug-free workplace by: (2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the a. Publishing a statement notifying employees that the unworkplace no later than five calendar days after such conviction; lawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the Applicant's worke. Notifying the agency in writing, within ten calendar days place and specifying the actions that will be taken against after receiving notice under subparagraph d.(2) from an ememployees for violation of such prohibition. ployee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, includb. Establishing an on-going drug-free awareness program to ing position title, to every grant officer or other designee on inform employees --whose grant activity the convicted employee was working, (1) The dangers of drug abuse in the workplace; unless the Federalagency has designated a central point for the receipt of such notices. Notice shall include the identification (2) The Applicant's policy of maintaining a drug-free number(s) of each affected grant; workplace; f. Taking one of the following actions, within 30 calendar (3) Any available drug counseling, rehabilitation, and days of receiving notice under subparagraph d.(2), with respect employee assistance programs; and to any employee who is so convicted ---(4) The penalties that may be imposed upon employees (1) Taking appropriate personnel action against such an for drug abuse violations occurring in the workplace. employee, up to and including termination, consistent with the c. Making it a requirement that each employee to be engaged requirements of the Rehabilitation Act of 1973, as amended; or in the performance of the grant be given a copy of the statement (2) Requiring such employee to participate satisfactorequired by paragraph a.; rily in a drug abuse assistance or rehabilitation program apd. Notifying the employee in the statement required by paraproved for such purposes by a Federal, State, or local health, law graph a. that, as a condition of employment under the grant, the enforcement, or other appropriate agency; employee will --g. Making a good faith effort to continue to maintain a drugfree workplace through implementation of paragraphs a. thru f. 2. Sites for Work Performance. The Applicant shall list (on separate pages) the site(s) for the performance of work done in connection with the HUD funding of the program/activity shown above: Place of Performance shall include the street address, city, county, State, and zip code. Identify each sheet with the Applicant name and address and the program/activity receiving grant funding.) IN002001 IN002002 IN002003 IN002004 if there are workplaces on file that are not identified on the attached sheets. Check here I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802) Title Name of Authorized Official **EXECUTIVE DIRECTOR** LINDA FREDRICK enda S. Fredrick 04/02/2012 form HUD-50070 (3/98)

ref. Handbooks 7417.1, 7475.13, 7485.1 & .3

### PHA Certifications of Compliance with PHA Plans and Related Regulations

U.S. Department of Housing and Urban Development Office of Public and Indian Housing Expires 4/30/2011

## BOARD RESOLUTION PH-3-2012

## PHA Certifications of Compliance with the PHA Plans and Related Regulations: Board Resolution to Accompany the PHA 5-Year and Annual PHA Plan

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other 5-Year and/or X Annual PHA authorized PHA official if there is no Board of Commissioners, I approve the submission of the Plan for the PHA fiscal year beginning 2012, hereinafter referred to as" the Plan", of which this document is a part and make the following certifications and agreements with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:

1. The Plan is consistent with the applicable comprehensive housing affordability strategy (or any plan incorporating such

2. The Plan contains a certification by the appropriate State or local officials that the Plan is consistent with the applicable Consolidated Plan, which includes a certification that requires the preparation of an Analysis of Impediments to Fair Housing Choice, for the PHA's jurisdiction and a description of the manner in which the PHA Plan is consistent with the applicable

3. The PHA certifies that there has been no change, significant or otherwise, to the Capital Fund Program (and Capital Fund Program/Replacement Housing Factor) Annual Statement(s), since submission of its last approved Annual Plan. The Capital Fund Program Annual Statement/Performance and Evaluation Report must be submitted annually even if

4. The PHA has established a Resident Advisory Board or Boards, the membership of which represents the residents assisted by the PHA, consulted with this Board or Boards in developing the Plan, and considered the recommendations of the Board or Boards (24 CFR 903.13). The PHA has included in the Plan submission a copy of the recommendations made by the Resident Advisory Board or Boards and a description of the manner in which the Plan addresses these recommendations.

5. The PHA made the proposed Plan and all information relevant to the public hearing available for public inspection at least 45 days before the hearing, published a notice that a hearing would be held and conducted a hearing to discuss the Plan and The PHA certifies that it will carry out the Plan in conformity with Title VI of the Civil Rights Act of 1964, the Fair Housing

Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990.

The PHA will affirmatively further fair housing by examining their programs or proposed programs, identify any impediments to fair housing choice within those programs, address those impediments in a reasonable fashion in view of the resources available and work with local jurisdictions to implement any of the jurisdiction's initiatives to affirmatively further fair housing that require the PHA's involvement and maintain records reflecting these analyses and actions.

8. For PHA Plan that includes a policy for site based waiting lists:

The PHA regularly submits required data to HUD's 50058 PIC/IMS Module in an accurate, complete and timely manner (as specified in PIH Notice 2006-24);

The system of site-based waiting lists provides for full disclosure to each applicant in the selection of the development in which to reside, including basic information about available sites; and an estimate of the period of time the applicant would likely have to wait to be admitted to units of different sizes and types at each site;

Adoption of site-based waiting list would not violate any court order or settlement agreement or be inconsistent with a pending complaint brought by HUD;

The PHA shall take reasonable measures to assure that such waiting list is consistent with affirmatively furthering fair

The PHA provides for review of its site-based waiting list policy to determine if it is consistent with civil rights laws and certifications, as specified in 24 CFR part 903.7(c)(1).

9. The PHA will comply with the prohibitions against discrimination on the basis of age pursuant to the Age Discrimination Act

10. The PHA will comply with the Architectural Barriers Act of 1968 and 24 CFR Part 41, Policies and Procedures for the Enforcement of Standards and Requirements for Accessibility by the Physically Handicapped.

The PHA will comply with the requirements of section 3 of the Housing and Urban Development Act of 1968, Employment Opportunities for Low-or Very-Low Income Persons, and with its implementing regulation at 24 CFR Part 135.

# Certification by State or Local Official of PHA Plans Consistency with the Consolidated Plan

I,	Mark Young	the	Chief Operating Officer	certify
that the F	Five Year and Annual P	HA Plan of the	City of Vincennes	is
consistent with the Consolidated Plan of			State of Indiana	prepared
pursuant	to 24 CFR Part 91.			

Signed / Dated by Appropriate State or Local Official

### Civil Rights Certification

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/2011

IN002

### Civil Rights Certification

PHA Name

Name of Authorized Official

### **Annual Certification and Board Resolution**

HOUSING AUTHORITY CITY OF VINCENNES

Signature Linda S. Fredrick

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioner, I approve the submission of the Plan for the PHA of which this document is a part and make the following certification and agreement with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:

The PHA certifies that it will carry out the public housing program of the agency in conformity with title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990, and will affirmatively further fair housing.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)
prosecute raise status and statements. Converse any

LINDA FREDRICK

Date 04/02/2012

PHA Number/HA Code

**EXECUTIVE DIRECTOR** 



## Vincennes Housing Authority

501 Hart Street P.O. Box 1636 Vincennes, Indiana 47591 (812) 882-5494 Fax (812) 882-7663 TDD (812) 882-5494 Commissioners:

Sharon S. Walker M. Frances Huxley Jack Hill Tim Thompson Patricia Madden Janice Eads Rebecca Nowaskie

### SIGNIFICANT AMENDMENT AND SUBSTANTIAL DEVIATION CRITERIA

Linda L. Fredrick As Described in 24 CFR 903.21, A PHA MAY AMEND OR MODIFY ITS ANNUAL OR FIVE YEAR Executive Director
PLAN AFTER SUBMITTING THE PLAN TO HUD. IF THE MODIFICATION OR CHANGE IS CONSIDERED A "SIGNIFICANT AMENDMENT" OR "SUBSTANTIAL DEVIATION" THE PHA MUST THEN COMPLY WITH A NUMBER OF REQUIREMENTS SIMILAR TO THOSE REQUIRED AT INITIAL DEVELOPMENT AND SUBMISSION OF THE PHA PLAN.

THE HOUSING AUTHORITY CITY OF VINCENNES HAS ADOPTED THE FOLLOWING CRITERIA IN DETERMINING "SIGNIFICANT AMENDMENT AND/OR SUBSTANTIAL DEVIATION/MODIFICATIONS".

- \*CHANGES IN RENT OR ADMISSIONS POLICIES OR ORGANIZATION OF THE WAITING LIST.
- \*ADDITIONS OF NON EMERGENCY WORK ITEMS OR CHANGES IN THE USE OF REPLACEMENT RESERVE FUNDS UNDER THE CAPITAL FUNDS.
- \*ANY CHANGE WITH REGARD TO DEMOLITION OR DISPOSITION, DESIGNATION, HOMEOWNERSHIP PROGRAMS OR CONSERVATION ACTIVITIES, WHEN APPLICABLE.
- \*WHEN ANY SIGNIFICANT AMENDMENT OR SUBSTANTIAL DEVIATION/MODIFICATIONS TO A PHA PLAN IS NEEDED, THE SAME REQUIREMENTS APPLY.
- \*THE PHA MUST CONSULT WITH THE RESIDENT ADVISORY BOARD.
- \*THE PHA MUST ENSURE CONSISTENCY WITH THE CONSOLIDATED PLAN OF THE JURISDICTION.
- \*THE PHA MUST PROVIDE FOR A REVIEW OF THE AMENDMENTS/MODIFICATIONS BY THE PUBLIC DURING A 45 DAY REVIEW PERIOD.
- \*THE PHA MAY NOT ADOPT THE AMENDMENT OR MODIFICATION UNTIL THE PHA HAS DULY CALLED A MEETING OF ITS BOARD OF COMMISSIONERS. THIS MEETING, AT WHICH THE AMENDMENT OR MODIFICATION IS ADOPTED, MUST BE OPEN TO THE PUBLIC.
- \*THE PHA MAY NOT IMPLEMENT THE AMENDMENT OR MODIFICATION UNTIL NOTIFICATION OF THE AMENDMENT OR MODIFICATION IS PROVIDED TO HUD AND APPROVED BY HUD IN ACCORDANCE WITH HUD'S PLAN REVIEW PROCEDURES.

IN THE DEVELOPMENT OF THE ANNUAL PLAN FOR YEAR BEGINNING 2012 , THE FOLLOWING CONDITIONS WERE NOTED.

- \*THERE HAVE BEEN NO CHANGES IN THE RENT, WAITING LIST OR ADMISSIONS POLICY.
- \*THERE HAVE BEEN NO SIGNIFICANT EMERGENCY WORK ITEMS THAT WERE NOT INCLUDED IN THE PRIOR PHA PLAN.
- \*THERE HAVE BEEN NO CHANGES IN REGARD TO DESIGNATION, HOMEOWNERSHIP OR CONVERSION ACTIVITIES SINCE THE PRIOR PHA PLAN.

EXECUTIVE DIRECTOR, LINDA FREDRICK,





Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program Annual Statement/Performance and Evaluation Report

U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226 Expires 4/30/2011

Part I: Summary	ummary		^			, , , , , , , , , , , , , , , , , , ,
PHA Name: Hous City of Vincennes	ing Authority of the	Grant Type and Number Capital Fund Program Grant No: IN36P00250111 Replacement Housing Factor Grant No: Date of CFFP: 2011	50111			FFY of Grant. 2011 FFY of Grant Approval:
Type of G	Type of Grant  Original Annual Statement  Original Annual Statement  Denote for Desiral Englisher	Reserve for Disasters/Emergencies		Revised Annual Statement (revision no:	ion no: ) )	
Line	Summary by Development Account	nt	Total E	Total Estimated Cost		Total Actual Cost 1
TIME	Summar J of Secretorium		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds					
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	0% of line 21) <sup>3</sup>	51,000			
3	1408 Management Improvements		40,000			
4	1410 Administration (may not exceed 10% of line 21)	ed 10% of line 21)	51,000			
5	1411 Audit					
9	1415 Liquidated Damages					
7	1430 Fees and Costs		20,000			
∞	1440 Site Acquisition					
6	1450 Site Improvement		20,000			
10	1460 Dwelling Structures		319,754			
11	1465.1 Dwelling Equipment—Nonexpendable	expendable				
12	1470 Non-dwelling Structures					
13	1475 Non-dwelling Equipment					
14	1485 Demolition					
15	1492 Moving to Work Demonstration	ion				
16	1495.1 Relocation Costs					
17	1499 Development Activities 4					

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>4</sup> RHF funds shall be included here.

Capital Fund Program, Capital Fund Program Replacement Housing Factor and Annual Statement/Performance and Evaluation Report Capital Fund Financing Program

U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226 Expires 4/30/2011

***************************************				•		Total Actual Cost i	Expended										Date
		FFY of Grant Approval:		☐ Revised Annual Statement (revision no:	☐ Final Performance and Evaluation Report	Total	Obligated										Director
		FFY of FFY of		☐ Revised An	Final Perfo	Total Estimated Cost	Revised 2										Signature of Public Housing Director
				encies		Total	Original				501,754				40,000		Date 7/29/2011 Sign
		Grant Type and Number Capital Fund Program Grant No: IN36P00250111 Replacement Housing Factor Grant No: Date of CFFP: 2011		Il Statement	Performance and Evaluation Report for Period Ending:	Summary by Development Account		1501 Collateralization or Debt Service paid by the PHA	9000 Collateralization or Debt Service paid Via System of Direct Payment	1502 Contingency (may not exceed 8% of line 20)	Amount of Annual Grant:: (sum of lines 2 - 19)	Amount of line 20 Related to LBP Activities	Amount of line 20 Related to Section 504 Activities	Amount of line 20 Related to Security - Soft Costs	Amount of line 20 Related to Security - Hard Costs	Amount of line 20 Related to Energy Conservation Measures	ida of Fredrick
	Part I: Summary	PHA Name: Housing Authority of the City of Vincennes	Type of Grant	Original Annual Statement	Performance at	Line Summa		18a 1501 Co	18ba 9000 Co	19 1502 Co	20 Amount	21 Amount	22 Amount	23 Amount	24 Amount	25 Amount	Signature of Executive Director

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>4</sup> RHF funds shall be included here.

		Status of Work											
			Funds Expended <sup>2</sup>										
	Federal FFY of Grant: 2011	Total Actual Cost	Funds Obligated <sup>2</sup>										
	Federal F	ted Cost	Revised 1										
	1	Total Estimated Cost	Original	319,754					¥				
	IN36P0025011 unt No:	Quantity		84									
	Grant Type and Number Capital Fund Program Grant No: IN36P002501111 CFFP (Yes/ No): Replacement Housing Factor Grant No:	Development Account No.		1460									
	Grant Type and Capital Fund Prog CFFP (Yes/ No): Replacement Hou	r Work											
	PHA Name: Hosing Authority of the City of Vincennes	General Description of Major Work Categories		START REPLACING HVAC									
Part II: Supporting Pages	PHA Name: Hosing Auth	Development Number Name/PHA-Wide Activities		IN002-001									

 $<sup>^1{\</sup>rm To}$  be completed for the Performance and Evaluation Report or a Revised Annual Statement.  $^2{\rm To}$  be completed for the Performance and Evaluation Report.

Part II: Sunnorting Pages								
PHA Name:		Grant Type and Number Capital Fund Program Grant No: CFFP (Yes/ No): Replacement Housing Factor Grant No:	lo: Grant No:		Federal F	Federal FFY of Grant:		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	k Development Account No.	Quantity	Total Estimated Cost	ited Cost	Total Actual Cost	ost	Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	

 $<sup>^1{\</sup>rm To}$  be completed for the Performance and Evaluation Report or a Revised Annual Statement.  $^2{\rm To}$  be completed for the Performance and Evaluation Report.

	Federal FFY of Grant: 2011	Reasons for Revised Target Dates									
		All Funds Expended (Quarter Ending Date)	Actual Expenditure End Date								
Part III: Implementation Schedule for Capital Fund Financing Program		All Funds (Quarter E	Original Expenditure End Date								
	ennes	All Fund Obligated (Quarter Ending Date)	Actual Obligation End Date								
	y of the City of Vincer	All Fund (Quarter E	Original Obligation End Date								
	PHA Name: Housing Authority of the City of Vincennes	Development Number Name/PHA-Wide Activities									

<sup>&</sup>lt;sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Part III: Implementation Schedule for Capital Fund Financing Program	dule for Capital Fund	Financing Program			
PHA Name:					Federal FFY of Grant:
Development Number Name/PHA-Wide Activities	All Fund (Quarter E	All Fund Obligated (Quarter Ending Date)	All Funds (Quarter E	All Funds Expended (Quarter Ending Date)	Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
IN002-001	10/1/2012		10/1/2012		

Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program Annual Statement/Performance and Evaluation Report

U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226 Expires 4/30/2011

Part I: Summary	ummary					
PHA Name: Housi City of Vincennes	g Authority of the	2250112			FFY of Grant: 2012 FFY of Grant Approval:	
-	Date of CFFP: 2012					T
Iype of Grant  Original A	1ype of Grant  Original Annual Statement  Original Annual Statement  Performance and Evaluation Report for Period Ending:		Revised Annual Statement (revision no:	ion no: )		
Line	Summary by Development Account	Total E	Total Estimated Cost		Total Actual Cost 1	
		Original	Revised <sup>2</sup>	Obligated	Expended	
1	Total non-CFP Funds					
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	82,536				
3	1408 Management Improvements	41,268				
4	1410 Administration (may not exceed 10% of line 21)	41,268				
5	1411 Audit					
9	1415 Liquidated Damages					
7	1430 Fees and Costs	41,268				
8	1440 Site Acquisition					
6	1450 Site Improvement	10,000				
10	1460 Dwelling Structures	196,341				
111	1465.1 Dwelling Equipment—Nonexpendable					
12	1470 Non-dwelling Structures					
13	1475 Non-dwelling Equipment					
14	1485 Demolition					
15	1492 Moving to Work Demonstration					
16	1495.1 Relocation Costs					
17	1499 Development Activities 4					

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>4</sup> RHF funds shall be included here.

Capital Fund Program, Capital Fund Program Replacement Housing Factor and Annual Statement/Performance and Evaluation Report Capital Fund Financing Program

U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226 Expires 4/30/2011

Part I: Summary	ummary				
PHA Name: Housing Authority of the City of Vincennes	Authority Capital Fund Program Grant No: IN36P00250112 Replacement Housing Factor Grant No: Date of CFFP: 2011		FFY of Grant Appr	FFY of Grant.2012 FFY of Grant Approval:	
Type of Grant	rant				
Origi	Original Annual Statement	es	☐ Revised Annus	☐ Revised Annual Statement (revision no:	•
Perfo	Performance and Evaluation Report for Period Ending:		Final Perform	Final Performance and Evaluation Report	
Line	Summary by Development Account	Total Esti	Total Estimated Cost	Total A	Total Actual Cost 1
		Original	Revised 2	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct				
	1 dyllion				
61	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	412,681			
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
Signatu	Signature of Executive Director Challe Chelluck	Date 02/28/2012 Signat	Signature of Public Housing Director	ector	Date

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>4</sup> RHF funds shall be included here.

Part II: Supporting Pages								
PHA Name: Hosing Aut	ority of the City of Vincennes	Grant Type and Number Capital Fund Program Grant No: IN36P00250112 CFFP (Yes/No): Replacement Housing Factor Grant No:	: IN36P0025011 ant No:	5	Federal	Federal FFY of Grant: 2012	12	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost	ited Cost	Total Actual Cost	Cost	Status of Work
				Original	Revised 1	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
IN002-004	COMPLETE HVAC & WATER HEATERS	1460	84	57,503				
IN002-001	START WINDOW REPLACEMENT	1460	83	138,838				

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>&</sup>lt;sup>2</sup> To be completed for the Performance and Evaluation Report.

Expires 4/30/2011

Annual Statement/Performance and Evaluation Report Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program

	Grant Type and Number Capital Fund Program Grant No: CFFP (Yes/No): Replacement Housing Factor Grant No:	Development Quantity Total Estimated Cost Total Actual Cost Status of Work Account No.	Original Revised Funds Funds Obligated Expended										
	Federa	nated Cost	Revised										
		Total Estin	Original										
	ant No:	Quantity											
	Grant Type and Number Capital Fund Program Grant No: CFFP (Yes/ No): Replacement Housing Factor Gra	Development Account No.											
	Grant Type and Capital Fund Prog CFFP (Yes/ No): Replacement Hou	General Description of Major Work Categories											
Part II: Supporting Pages	PHA Name:	Development Number Name/PHA-Wide Activities		×									

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>&</sup>lt;sup>2</sup> To be completed for the Performance and Evaluation Report.

Annual Statement/Performance and Evaluation Report Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program

U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226 Expires 4/30/2011

	Federal FFY of Grant: 2012	Reasons for Revised Target Dates <sup>1</sup>									
		All Funds Expended (Quarter Ending Date)	Actual Expenditure End Date								
		All Funds (Quarter E	Original Expenditure End Date								
Financing Program	ennes	All Fund Obligated (Quarter Ending Date)	Actual Obligation End Date								
dule for Capital Fund	ty of the City of Vinc	All Fund (Quarter E	Original Obligation End Date								
Part III: Implementation Schedule for Capital Fund Financing Program	PHA Name: Housing Authority of the City of Vincennes	Development Number Name/PHA-Wide Activities									

<sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

	Federal FFY of Grant: 2012	Reasons for Revised Target Dates <sup>1</sup>				2							
	Federal		End										
		All Funds Expended (Quarter Ending Date)	Actual Expenditure End Date										
		All Funds (Quarter E	Original Expenditure End Date	06/30/2013	12/31/2013								
Financing Program	enne	All Fund Obligated (Quarter Ending Date)	Actual Obligation End Date										
dule for Capital Fund	ty of the City of Vinc	All Fund (Quarter E	Original Obligation End Date	4/1/2012	12/31/2012								
Part III: Implementation Schedule for Capital Fund Financing Program	PHA Name: Housing Authority of the City of Vincenne	Development Number Name/PHA-Wide Activities		IN002-004	IN002-001								

<sup>&</sup>lt;sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Capital Fund Program, Capital Fund Program Replacement Housing Factor and Annual Statement/Performance and Evaluation Report Capital Fund Financing Program

Office of Public and Indian Housing

OMB No. 2577-0226

U.S. Department of Housing and Urban Development

Expires 4/30/2011 FFY of Grant: 2011 FFY of Grant Approval: Expended Total Actual Cost ☐ Revised Annual Statement (revision no: ☐ Final Performance and Evaluation Report **Total Estimated Cost** Revised 319,754 51,000 51,000 20,000 40,000 20,000 Original Capital Fund Program Grant No: IN36P00250111 Replacement Housing Factor Grant No: ☐ Reserve for Disasters/Emergencies Grant Type and Number 1410 Administration (may not exceed 10% of line 21) Date of CFFP: 2011 1406 Operations (may not exceed 20% of line 21) 3 Type of Grant

Solutional Annual Statement □ Reserve for Disas
□ Performance and Evaluation Report for Period Ending: 1465.1 Dwelling Equipment—Nonexpendable 1492 Moving to Work Demonstration Summary by Development Account 1408 Management Improvements 1475 Non-dwelling Equipment 1470 Non-dwelling Structures 1499 Development Activities PHA Name: Housing Authority of the 1415 Liquidated Damages 1460 Dwelling Structures 1495.1 Relocation Costs 1450 Site Improvement 1440 Site Acquisition Total non-CFP Funds 1430 Fees and Costs 1485 Demolition 1411 Audit Part I: Summary City of Vincennes Line 10 12 13 14 15 16 9 00 6

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report.
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

RHF funds shall be included here.

Capital Fund Program, Capital Fund Program Replacement Housing Factor and Annual Statement/Performance and Evaluation Report

U.S. Department of Housing and Urban Development

Office of Public and Indian Housing OMB No. 2577-0226 Expires 4/30/2011 Expended Total Actual Cost Final Performance and Evaluation Report ☐ Revised Annual Statement (revision no: Obligated FFY of Grant:2011 FFY of Grant Approval: Revised<sup>2</sup> **Total Estimated Cost** Original 501.754 ☐ Reserve for Disasters/Emergencies 9000 Collateralization or Debt Service paid Via System of Direct Capital Fund Program Grant No: IN36P00250111 1501 Collateralization or Debt Service paid by the PHA Amount of line 20 Related to Section 504 Activities Performance and Evaluation Report for Period Ending: Replacement Housing Factor Grant No: Date of CFFP: 2011 Amount of line 20 Related to Security - Soft Costs 1502 Contingency (may not exceed 8% of line 20) Amount of Annual Grant:: (sum of lines 2 - 19) Amount of line 20 Related to LBP Activities Grant Type and Number Summary by Development Account Payment Capital Fund Financing Program Type of Grant

Original Annual Statement Part I: Summary Housing Authority of the City of PHA Name: Vincennes

18ba

19 20 21 22

18a

Line

Date

Signature of Public Housing Director

Date 7/29/2011

Amount of line 20 Related to Energy Conservation Measures

Signature of Executive Director

Amount of line 20 Related to Security - Hard Costs

23

24

40,000

To be completed for the Performance and Evaluation Report.

<sup>&</sup>lt;sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement. 
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>&</sup>lt;sup>4</sup> RHF funds shall be included here.

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>&</sup>lt;sup>2</sup> To be completed for the Performance and Evaluation Report.

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

Part II: Supporting Pages									
PHA Name:		Grant Type and Capital Fund Pro CFFP (Yes/ No): Replacement Hou	Grant Type and Number Capital Fund Program Grant No: CFFP (Yes/ No): Replacement Housing Factor Grant No:	ant No:		Federal	Federal FFY of Grant:		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	/ork	Development Account No.	Quantity	Total Estimated Cost	ated Cost	Total Actual Cost	Cost	Status of Work
					Original	Revised 1	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>&</sup>lt;sup>2</sup> To be completed for the Performance and Evaluation Report.

	Federal FFY of Grant: 2011	Reasons for Revised Target Dates <sup>1</sup>									
		All Funds Expended (Quarter Ending Date)	Actual Expenditure End Date								
		All Funds (Quarter E	Original Expenditure End Date								
Financing Program	ennes	All Fund Obligated (Quarter Ending Date)	Actual Obligation End Date								
dule for Capital Fund	y of the City of Vinc	All Fund (Quarter E	Original Obligation End Date								
Part III: Implementation Schedule for Capital Fund Financing Program	PHA Name: Housing Authority of the City of Vincennes	Development Number Name/PHA-Wide Activities									

<sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Annual Statement/Performance and Evaluation Report Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program

	Federal FFY of Grant:	ed Reasons for Revised Target Dates <sup>1</sup> te)	Actual Expenditure End Date								
gram		All Funds Expended (Quarter Ending Date)	Original Expenditure End Date	10/1/2012							
Part III: Implementation Schedule for Capital Fund Financing Program		All Fund Obligated (Quarter Ending Date)	Original Actual Obligation Obligation End End Date Date	10/1/2012							
Part III: Implementation	PHA Name:	Development Number Name/PHA-Wide Activities		IN002-001							

<sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226 Expires 4/30/2011

> Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program Annual Statement/Performance and Evaluation Report

A Name: Housing Authority of the care in the control in the con	rart I: Summary	ummary					
of Grant    Continual Statement   □ Reserve for Disasters/Emergencies   □ Firial Performance and Evaluation   □ Firial Performance and Evaluation Report for Period Ending:   Summary by Development Account   Total Estimated Cost	PHA Nam City of Vin		0250112			FFY of Grant: 2012 FFY of Grant Appr	FFY of Grant. 2012 FFY of Grant Approval:
Summary by Development Account         Total Estimated Cost           Total non-CFP Funds         Revised²           1406 Operations (may not exceed 20% of line 21)³         82,536           1410 Administration (may not exceed 10% of line 21)         41,268           1411 Audit         41,268           1415 Liquidated Damages         41,268           1430 Fees and Costs         41,268           1440 Site Acquisition         10,000           1460 Dwelling Structures         196,341           1455 Incutures         196,341           1455 Demolition         1485 Demolition           1485 Demolition         1485 Demolition           1492 Moving to Work Demonstration         1495 In Relocation Costs           1400 Development Activities 4         1400 Development Activities 4	Type of Gr	n Repor		Revised Annual Statement (re	vision no:		
Total non-CFP Funds   Revised   Price	Line	Summary by Development Account	Total E	Stimated Cost		Total Actual Cost 1	t,1
Total non-CFP Funds   82,536     1406 Operations (may not exceed 20% of line 21)			Original	Revised <sup>2</sup>	Obligated	Expended	nded
1406 Operations (may not exceed 20% of line 21) 1408 Management Improvements 1410 Administration (may not exceed 10% of line 21) 1411 Audit 1411 Audit 1415 Liquidated Damages 1430 Fees and Costs 1440 Site Acquisition 1450 Site Improvement 1450 Site Improvement 1465.1 Dwelling Structures 1465.1 Dwelling Structures 1470 Non-dwelling Structures 1475 Non-dwelling Structures 1485 Demolition 1492 Moving to Work Demonstration 1409 Develorment Activities 4	1	Total non-CFP Funds					
1408 Management Improvements 1410 Administration (may not exceed 10% of line 21) 1411 Audit 1415 Liquidated Damages 1430 Fees and Costs 1440 Site Acquisition 1450 Site Improvement 1465.1 Dwelling Structures 1465.1 Dwelling Structures 1470 Non-dwelling Structures 1475 Non-dwelling Equipment 1485 Demolition 1495.1 Relocation Costs 1400 Develorment Activities 4	2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	82,536				
1410 Administration (may not exceed 10% of line 21) 1411 Audit 1415 Liquidated Damages 1430 Fees and Costs 1440 Site Acquisition 1450 Site Improvement 1465 I Dwelling Structures 1465 Dewelling Structures 1470 Non-dwelling Structures 1475 Non-dwelling Structures 1485 Demolition 1492 Moving to Work Demonstration 1409 Develorment Activities 4	3	1408 Management Improvements	41,268				
1411 Audit 1415 Liquidated Damages 1430 Fees and Costs 1440 Site Acquisition 1450 Site Improvement 1460 Dwelling Structures 1465.1 Dwelling Structures 1475 Non-dwelling Structures 1475 Non-dwelling Equipment 1485 Demolition 1492 Moving to Work Demonstration 6 1492.1 Relocation Costs 1409 Develorment Activities 4	4	1410 Administration (may not exceed 10% of line 21)	41,268				
1415 Liquidated Damages 1430 Fees and Costs 1440 Site Acquisition 1450 Site Improvement 1465.1 Dwelling Structures 1465.1 Dwelling Structures 1470 Non-dwelling Structures 1475 Non-dwelling Equipment 1485 Demolition 1495.1 Relocation Costs 1400 Develorment Activities 4	5	1411 Audit					
1430 Fees and Costs 1440 Site Acquisition 1450 Site Improvement 1460 Dwelling Structures 1465.1 Dwelling Equipment—Nonexpendable 1470 Non-dwelling Structures 1475 Non-dwelling Equipment 1485 Demolition 1492 Moving to Work Demonstration 1495.1 Relocation Costs	9	1415 Liquidated Damages					
1440 Site Acquisition 1450 Site Improvement 1460 Dwelling Structures 1465.1 Dwelling Equipment—Nonexpendable 1470 Non-dwelling Structures 1475 Non-dwelling Equipment 1485 Demolition 1492 Moving to Work Demonstration 1495.1 Relocation Costs	7	1430 Fees and Costs	41,268				
1450 Site Improvement 1460 Dwelling Structures 1465.1 Dwelling Equipment—Nonexpendable 1470 Non-dwelling Structures 1475 Non-dwelling Equipment 1485 Demolition 1492 Moving to Work Demonstration 1495.1 Relocation Costs	8	1440 Site Acquisition					
1460 Dwelling Structures 1465.1 Dwelling Equipment—Nonexpendable 1470 Non-dwelling Equipment 1475 Non-dwelling Equipment 1485 Demolition 1492 Moving to Work Demonstration 1495.1 Relocation Costs	6	1450 Site Improvement	10,000				
	10	1460 Dwelling Structures	196,341				
	11	1465.1 Dwelling Equipment—Nonexpendable					
	12	1470 Non-dwelling Structures					
	13	1475 Non-dwelling Equipment					
	14	1485 Demolition					
	15	1492 Moving to Work Demonstration					
	16	1495.1 Relocation Costs					
	17	1499 Development Activities 4					

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>4</sup> RHF funds shall be included here.

Office of Public and Indian Housing OMB No. 2577-0226 U.S. Department of Housing and Urban Development Expires 4/30/2011

Annual Statement/Performance and Evaluation Report Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program

PHA Name: Housing Authority of the City of Vincennes	PHA Name:  Housing Authority of the City of Replacement Housing Factor Grant No: N36P00250112 Capital Fund Program Grant No: Name and Number Capital Fund Program Grant No: Name and Number Capital Fund Program Grant No: Date of CFFP: 2011			FFY of Grant:2012 FFY of Grant Appi	FFY of Grant:2012 FFY of Grant Approval:	
Type of Grant				:		
Origina	Original Annual Statement Reserve for Disasters/Emergencies	cies		Kevised Annual	Revised Annual Statement (revision no:	
Perform	Performance and Evaluation Report for Period Ending:			Final Performan	Final Performance and Evaluation Report	
Line	Summary by Development Account		<b>Total Estimated Cost</b>		Total A	Total Actual Cost 1
		Original	R	Revised 2	Obligated	Expended
	1501 Collateralization or Debt Service paid by the PHA					
18ba	9000 Collateralization or Debt Service paid Via System of Direct					
	Payment					
	1502 Contingency (may not exceed 8% of line 20)					
	Amount of Annual Grant:: (sum of lines 2 - 19)	412,681				
	Amount of line 20 Related to LBP Activities					
	Amount of line 20 Related to Section 504 Activities					
	Amount of line 20 Related to Security - Soft Costs					
	Amount of line 20 Related to Security - Hard Costs					
	Amount of line 20 Related to Energy Conservation Measures					
nature	Signature of Executive Director J. J. Date	ate 02/28/2012	Signature of Public Housing Director	lic Housing Dire	ctor	Date

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report.
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.
<sup>4</sup> RHF funds shall be included here.

Expires 4/30/2011

Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program \* Annual Statement/Performance and Evaluation Report

Part II: Sunnorting Pages									
PHA Name: Hosing Aut	PHA Name: Hosing Authority of the City of Vincennes	Grant Type and Capital Fund Pro CFFP (Yes/No): Replacement Hoo	Grant Type and Number Capital Fund Program Grant No: IN36P00250112 CFFP (Yes/ No): Replacement Housing Factor Grant No:	o: IN36P002501 rant No:	12	Federal F	Federal FFY of Grant: 2012	12	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Work	Development Account No.	Quantity	Total Estimated Cost	ated Cost	Total Actual Cost	Cost	Status of Work
					Original	Revised 1	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
IN002-004	COMPLETE HVAC & WATER HEATERS		1460	84	57,503				
IN002-001	START WINDOW REPLACEMENT	ENT	1460	83	138,838				

 $<sup>^1\,{\</sup>rm To}$  be completed for the Performance and Evaluation Report or a Revised Annual Statement.  $^2\,{\rm To}$  be completed for the Performance and Evaluation Report.

		Status of Work											
			Funds Expended <sup>2</sup>										
	Federal FFY of Grant:	Total Actual Cost	Funds Obligated <sup>2</sup>										
	Federal F	ated Cost	Revised 1										
		Total Estimated Cost	Original										
	ant No:	Quantity											
	Grant Type and Number Capital Fund Program Grant No: CFFP (Yes/ No): Replacement Housing Factor Grant No:	Development Account No.											
	Grant Tyl Capital Fu CFFP (Yes	General Description of Major Work Categories											
Part II: Supporting Pages	PHA Name:	Development Number Name/PHA-Wide Activities											

 $<sup>^1\,{\</sup>rm To}$  be completed for the Performance and Evaluation Report or a Revised Annual Statement.  $^2\,{\rm To}$  be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program PHA Name: Housing Authority of the City of Vincennes	dule for Capital Fund	Financing Program ennes			Federal FFY of Grant: 2012	
Development Number Name/PHA-Wide Activities	All Func (Quarter E	All Fund Obligated (Quarter Ending Date)	All Funds (Quarter E	All Funds Expended (Quarter Ending Date)	Reasons for Revised Target Dates 1	
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date		
						T
						T
						T
						T

<sup>&</sup>lt;sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Annual Statement/Performance and Evaluation Report Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program

	Federal FFY of Grant: 2012	Reasons for Revised Target Dates										
	<u>.</u>	All Funds Expended (Quarter Ending Date)	Actual Expenditure End Date									
		All Funds (Quarter E	Original Expenditure End Date	06/30/2013	12/31/2013							
Financing Program	enne	All Fund Obligated (Quarter Ending Date)	Actual Obligation End Date									
edule for Capital Fund	ity of the City of Vince	All Fund (Quarter E	Original Obligation End Date	4/1/2012	12/31/2012							
Part III: Implementation Schedule for Capital Fund Financing Program	PHA Name: Housing Authority of the City of Vincenne	Development Number Name/PHA-Wide Activities		IN002-004	IN002-001							

<sup>&</sup>lt;sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program Annual Statement/Performance and Evaluation Report

U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226 Expires 4/30/2011

g Authority of the Capital Engineer and Number Capital Factor Grant No. N36P00250111   Replacement Housing Report Tor Period Endings   Total Estimated Cost   Obligated   Total Capital Report Tor Period Endings   Total Estimated Cost   Obligated   Total Grant No. N36P0025011   Revised   Obligated   Total Grant No. N36P0025011   N36P0025011	Part I: Summary	ummarv		-3			
of Creat         □ Receive for Disasters Emergencies         □ Revised Annual Statement         □ Intra Performance and Evaluation Report         Total Estimated Cost         Total Lestination Report         Total Lestinanted Cost	PHA Nam City of Vi	ie: Housing Authority of the ncennes	Grant Type and Number Capital Fund Program Grant No: IN36P002: Replacement Housing Factor Grant No: Date of CFFP: 2011	550111			FFY of Grant: 2011 FFY of Grant Approval:
Summary by Development Account         Total Estimated Cost         Total Instituted Cost           Total non-CFP Funds         51,000         A0,000           1406 Operations (may not exceed 20% of line 21)         51,000         A0,000           1410 Administration (may not exceed 10% of line 21)         51,000         A0,000           1411 Administration (may not exceed 10% of line 21)         51,000         A0,000           1411 Liquidated Damages         20,000         A0,000           1430 Fees and Costs         20,000         A0,000           1460 Dwelling Structures         319,754         A0,000           1470 Non-dwelling Equipment         A0,000         A0,000           1485 Demolition         A0,000         A0,000           1492 Moving to Work Demonstration         A0,000         A0,000           1495 Relocation Costs         A0,000         A0,000         A0,000           1499 Development Activities*         A0,000         A0,000         A0,000         A0,000	Type of G	rant nal Annual Statement mance and Evaluation Report	Reserve for Disasters/Emergencies for Period Ending:		Revised Annual Statement (revis	sion no: ) ion Report	
Total non-CFP Funds         Original         Revised³         Obligated           1406 Operations (may not exceed 20% of line 21)³         51,000         A0,000         A0,000 <t< th=""><th>Line</th><th>Summary by Development</th><th>Account</th><th>Total Es</th><th>timated Cost</th><th></th><th>Actual Cost 1</th></t<>	Line	Summary by Development	Account	Total Es	timated Cost		Actual Cost 1
Total non-CFP Funds  1406 Operations (may not exceed 20% of line 21) <sup>3</sup> 1408 Management Improvements  1410 Administration (may not exceed 10% of line 21)  1411 Audit  1415 Liquidated Damages  1430 Fees and Costs  1440 Site Acquisition  1450 Site Improvement  1465.1 Dwelling Structures  1475 Non-dwelling Equipment—Nonexpendable  1475 Non-dwelling Equipment  4 1485 Demolition  5 1492 Moving to Work Demonstration  6 1495.1 Relocation Costs  7 1499 Development Activities <sup>4</sup>				Original	Revised <sup>2</sup>	Obligated	Expended
1406 Operations (may not exceed 20% of line 21) <sup>3</sup> 1408 Management Improvements 1410 Administration (may not exceed 10% of line 21) 1411 Audit 1415 Liquidated Damages 1430 Fees and Costs 1440 Site Acquisition 1450 Site Improvement 1460 Dwelling Structures 1465.1 Dwelling Equipment—Nonexpendable 1475 Non-dwelling Equipment 1485 Demolition 5 1492 Moving to Work Demonstration 6 1499.1 Relocation Costs 7 1499 Development Activities <sup>4</sup>	1	Total non-CFP Funds					
1408 Management Improvements 1410 Administration (may not exceed 10% of line 21) 1411 Audit 1411 Liquidated Damages 1430 Fees and Costs 1440 Site Acquisition 1450 Site Improvement 1460 Dwelling Structures 1 1465.1 Dwelling Equipment—Nonexpendable 2 1475 Non-dwelling Structures 3 1475 Non-dwelling Equipment 4 1485 Demolition 5 1492 Moving to Work Demonstration 6 1495.1 Relocation Costs 7 1499 Development Activities 4	2	1406 Operations (may not exc	ceed 20% of line 21) <sup>3</sup>	51,000			
1410 Administration (may not exceed 10% of line 21) 1411 Audit 1415 Liquidated Damages 1430 Fees and Costs 1440 Site Acquisition 1450 Site Improvement 1465 Li Dwelling Structures 1465 Li Dwelling Equipment—Nonexpendable 1475 Non-dwelling Equipment 1485 Demolition 1485 Demolition 1492 Moving to Work Demonstration 6 1495.1 Relocation Costs 7 1499 Development Activities 4	3	1408 Management Improvem	ients	40,000			
1411 Audit 1415 Liquidated Damages 1416 Exes and Costs 1440 Site Acquisition 1450 Site Improvement 1460 Dwelling Structures 1460 Dwelling Structures 1475 Non-dwelling Structures 1475 Non-dwelling Equipment 1485 Demolition 1492 Moving to Work Demonstration 1499 Development Activities 4	4	1410 Administration (may no	t exceed 10% of line 21)	51,000			
1415 Liquidated Damages 1430 Fees and Costs 1440 Site Acquisition 1450 Site Improvement 1460 Dwelling Structures 1465.1 Dwelling Equipment—Nonexpendable 1475 Non-dwelling Structures 1475 Demolition 1495 Demolition 1495.1 Relocation Costs 1499 Development Activities 4	5	1411 Audit					
1430 Fees and Costs 1440 Site Acquisition 1450 Site Improvement 1460 Dwelling Structures 1465.1 Dwelling Equipment—Nonexpendable 1470 Non-dwelling Equipment 1475 Non-dwelling Equipment 1485 Demolition 1492 Moving to Work Demonstration 1492.1 Relocation Costs 1499 Development Activities <sup>4</sup>	9	1415 Liquidated Damages					
1440 Site Acquisition 1450 Sie Improvement 1460 Dwelling Structures 1465.1 Dwelling Equipment—Nonexpendable 1470 Non-dwelling Structures 1475 Non-dwelling Equipment 1485 Demolition 1492 Moving to Work Demonstration 1495.1 Relocation Costs 1499 Development Activities <sup>4</sup>	7	1430 Fees and Costs		20,000			
1450 Site Improvement 1460 Dwelling Structures 1465.1 Dwelling Equipment—Nonexpendable 1470 Non-dwelling Equipment 1475 Non-dwelling Equipment 1485 Demolition 1492 Moving to Work Demonstration 1495.1 Relocation Costs 1499 Development Activities <sup>4</sup>	8	1440 Site Acquisition					
1460 Dwelling Structures 1465.1 Dwelling Equipment—Nonexpendable 1470 Non-dwelling Structures 1475 Non-dwelling Equipment 1485 Demolition 1492 Moving to Work Demonstration 1495.1 Relocation Costs 1499 Development Activities <sup>4</sup>	6	1450 Site Improvement		20,000			
1465.1 Dwelling Equipment—Nonexpendable 1470 Non-dwelling Structures 1475 Non-dwelling Equipment 1485 Demolition 1492 Moving to Work Demonstration 1495.1 Relocation Costs 1499 Development Activities <sup>4</sup>	10	1460 Dwelling Structures		319,754			
	11	1465.1 Dwelling Equipment-	-Nonexpendable				
	12	1470 Non-dwelling Structure	SS				
	13	1475 Non-dwelling Equipme	ant				
	14	1485 Demolition					
	15	1492 Moving to Work Demc	onstration				
	16	1495.1 Relocation Costs					
	17	1499 Development Activities	4 N				

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>4</sup> RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program

U.S. Department of Housing and Urban Development

Office of Public and Indian Housing

OMB No. 2577-0226

Expires 4/30/2011 Date Expended **Total Actual Cost** Final Performance and Evaluation Report ☐ Revised Annual Statement (revision no: Obligated FFY of Grant:2011 FFY of Grant Approval: Signature of Public Housing Director Revised 2 Total Estimated Cost Original 501,754 Date 7/29/2011 40,000 ☐ Reserve for Disasters/Emergencies 9000 Collateralization or Debt Service paid Via System of Direct Amount of line 20 Related to Energy Conservation Measures Capital Fund Program Grant No: IN36P00250111 Replacement Housing Factor Grant No: Date of CFFP: 2011 1501 Collateralization or Debt Service paid by the PHA Amount of line 20 Related to Section 504 Activities Performance and Evaluation Report for Period Ending: Amount of line 20 Related to Security - Hard Costs Amount of line 20 Related to Security - Soft Costs 1502 Contingency (may not exceed 8% of line 20) Amount of Annual Grant:: (sum of lines 2 - 19) Amount of line 20 Related to LBP Activities Grant Type and Number Summary by Development Account Payment Signature of Executive Director Type of Grant

Original Annual Statement Part I: Summary Housing Authority of the City of PHA Name: Vincennes 18ba Line 18a 19 20 23 24 25 21 22

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>&</sup>lt;sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>&</sup>lt;sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>&</sup>lt;sup>4</sup> RHF funds shall be included here.

حسد حدد صطالم مساو موم									
vame: Hosing Autl	PHA Name: Hosing Authority of the City of Vincennes	Grant Typ Capital Fur CFFP (Yes Replaceme	Grant Type and Number Capital Fund Program Grant No: IN36P002501111 CFFP (Yes/ No): Replacement Housing Factor Grant No:	in36P002501	_	Federal I	Federal FFY of Grant: 2011	=	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Work	Development Account No.	Quantity	Total Estimated Cost	ated Cost	Total Actual Cost	Sost	Status of Work
					Original	Revised 1	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
IN002-001	START REPLACING HVAC		1460	84	319,754				
·									
					,				

 $<sup>^1{\</sup>rm To}$  be completed for the Performance and Evaluation Report or a Revised Annual Statement.  $^2{\rm To}$  be completed for the Performance and Evaluation Report.

PHA Name:									
		rant Type apital Fund FFP (Yes/]	Grant Type and Number Capital Fund Program Grant No: CFFP (Yes/ No): Replacement Housing Factor Grant No:	ınt No:		Federal I	Federal FFY of Grant:		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories		Development Account No.	Quantity	Total Estimated Cost	ated Cost	Total Actual Cost	Cost	Status of Work
					Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	

 $<sup>^1\,{\</sup>rm To}$  be completed for the Performance and Evaluation Report or a Revised Annual Statement.  $^2\,{\rm To}$  be completed for the Performance and Evaluation Report.

	Federal FFY of Grant: 2011	Reasons for Revised Target Dates 1									
		All Funds Expended (Quarter Ending Date)	Actual Expenditure End Date								
		All Funds (Quarter E	Original Expenditure End Date								
Financing Program	ennes	All Fund Obligated (Quarter Ending Date)	Actual Obligation End Date								
lule for Capital Fund	y of the City of Vinc	All Func (Quarter E	Original Obligation End Date								
Part III: Implementation Schedule for Capital Fund Financing Program	PHA Name: Housing Authority of the City of Vincennes	Development Number Name/PHA-Wide Activities									

<sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

	Federal FFY of Grant:	Reasons for Revised Target Dates 1										
		All Funds Expended (Quarter Ending Date)	Actual Expenditure End Date									
		All Fund (Quarter E	Original Expenditure End Date	10/1/2012								
Financing Program		All Fund Obligated (Quarter Ending Date)	Actual Obligation End Date									
dule for Capital Fund		All Fund (Quarter F	Original Obligation End Date	10/1/2012								
Part III: Implementation Schedule for Capital Fund Financing Program	PHA Name:	Development Number Name/PHA-Wide Activities		IN002-001								

<sup>&</sup>lt;sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Office of Public and Indian Housing U.S. Department of Housing and Urban Development OMB No. 2577-0226

Expires 4/30/2011

Capital Fund Program, Capital Fund Program Replacement Housing Factor and Annual Statement/Performance and Evaluation Report Capital Fund Financing Program

FFY of Grant: 2012 FFY of Grant Approval: Capital Fund Program Grant No: IN36P00250112 Replacement Housing Factor Grant No: Date of CFFP: 2012 Grant Type and Number PHA Name: Housing Authority of the City of Vincennes Part I: Summary Type of Grant

Origin.	☐ Reserve for Disasters/Emergencies		Revised Annual Statement (revision no:	ion no:	
☐ Perfor	] Performance and Evaluation Report for Period Ending:		Final Performance and Evaluation Report		
Line	Summary by Development Account	Total E	Total Estimated Cost	Total Act	Total Actual Cost 1
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	82,536			
3	1408 Management Improvements	41,268			
4	1410 Administration (may not exceed 10% of line 21)	41,268			
5	1411 Audit				
9	1415 Liquidated Damages				
7	1430 Fees and Costs	41,268			
8	1440 Site Acquisition				
6	1450 Site Improvement	10,000			
10	1460 Dwelling Structures	196,341			
111	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
91	1495.1 Relocation Costs				
17	1499 Development Activities 4				

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report.
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.
<sup>4</sup> RHF funds shall be included here.

Capital Fund Program, Capital Fund Program Replacement Housing Factor and Annual Statement/Performance and Evaluation Report Capital Fund Financing Program

U.S. Department of Housing and Urban Development

Office of Public and Indian Housing

OMB No. 2577-0226

Expires 4/30/2011 Date Expended Total Actual Cost Final Performance and Evaluation Report ☐ Revised Annual Statement (revision no: Obligated FFY of Grant:2012 FFY of Grant Approval: Signature of Public Housing Director Revised 2 Total Estimated Cost Original Date 02/28/2012 412,681 ☐ Reserve for Disasters/Emergencies 9000 Collateralization or Debt Service paid Via System of Direct Grant Type and Number Capital Fund Program Grant No: IN36P00250112 Replacement Housing Factor Grant No: Date of CFFP: 2011 Amount of line 20 Related to Energy Conservation Measures 1501 Collateralization or Debt Service paid by the PHA Amount of line 20 Related to Section 504 Activities Performance and Evaluation Report for Period Ending: Amount of line 20 Related to Security - Hard Costs Amount of line 20 Related to Security - Soft Costs 1502 Contingency (may not exceed 8% of line 20) Amount of Annual Grant:: (sum of lines 2 - 19) Amount of line 20 Related to LBP Activities Summary by Development Account Payment Signature of Executive Director Type of Grant

Original Annual Statement Part I: Summary Housing Authority of the City of PHA Name: Vincennes Line 18ba 18a 19 20 22 23 24 21

To be completed for the Performance and Evaluation Report.

<sup>&</sup>lt;sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement. 
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

RHF funds shall be included here.

PHA Name: Hosing Authority of the City of Vincennes  Development Number Name/PHA-Wide Activities  IN002-004 IN002-001 COMPLETE HVAC & WA HEATERS TRART WINDOW REPLA START WINDOW REPLA	Tajor V	Number gram Grant No: I. sing Factor Gran lopment unt No.	N36P00250112 It No:		Federal F	Federal FFY of Grant: 2012	12		
DC CC HHE STI									
				Total Estimated Cost	d Cost	Total Actual Cost	ost	Status of Work	
				Original I	Revised 1	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>		
			84	57,503					
		1460	83	138,838					
									-
									-
									-

 $<sup>^1\,{\</sup>rm To}$  be completed for the Performance and Evaluation Report or a Revised Annual Statement.  $^2\,{\rm To}$  be completed for the Performance and Evaluation Report.

		Work											
		Status of Work											
		Total Actual Cost	Funds Expended <sup>2</sup>										
	Grant Type and Number Capital Fund Program Grant No: CFFP (Yes/ No): Replacement Housing Factor Grant No:		Funds Obligated <sup>2</sup>										
		ated Cost	Revised 1										
		Total Estimated Cost	Original										
		Quantity											
		Development Account No.											
	Grant Typ Capital Fu CFFP (Yee	General Description of Major Work Categories											
Part II: Supporting Pages	PHA Name:	Development Number Name/PHA-Wide Activities											

 $<sup>^1{\</sup>rm To}$  be completed for the Performance and Evaluation Report or a Revised Annual Statement.  $^2{\rm To}$  be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program	Federal FFY of Grant: 2012	Reasons for Revised Target Dates 1									
		All Funds Expended (Quarter Ending Date)	Actual Expenditure End Date								
		All Funds (Quarter E	Original Expenditure End Date								
	ennes	All Fund Obligated (Quarter Ending Date)	Actual Obligation End Date								
	y of the City of Vinc	All Fund (Quarter E	Original Obligation End Date								
Part III: Implementation Sched	PHA Name: Housing Authority of the City of Vincennes	Development Number Name/PHA-Wide Activities									

<sup>&</sup>lt;sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226 Expires 4/30/2011

		t Dates <sup>1</sup>										
	Federal FFY of Grant: 2012	Reasons for Revised Target Dates										
		All Funds Expended (Quarter Ending Date)	Actual Expenditure End Date									~
inancing Program	nne	All Funds (Quarter E	Original Expenditure End Date	06/30/2013	12/31/2013							
		All Fund Obligated (Quarter Ending Date)	Actual Obligation End Date									
dule for Capital Fund	ty of the City of Vinc	All Fund (Quarter E	Original Obligation End Date	4/1/2012	12/31/2012							
Part III: Implementation Schedule for Capital Fund Financing Program	PHA Name: Housing Authority of the City of Vincenne	Development Number Name/PHA-Wide Activities		IN002-004	IN002-001							

<sup>&</sup>lt;sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.